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Pic	PTO/SB/05 (11-00)						
Please type a piles sign (+) inside this box	Approved for use through 10/31/2002, OMB 0851-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it displays a valid OMB control number.						
UTILITY	Attorney Docket No. 1613370-0011						
PATENT APPLICATION	First Inventor Gene R. Anderson						
TRANSMITTAL	Title Attenuator And Conditioner						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EL 612 597 304 US						
APPLICATION ELEMENTS	Assistant Commissioner for Patents						
See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC 20231						
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit on original and a hyplicate for fee processing)	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
Applicant claims small entity status. See 37 CFR 1.27.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
3. X Specification [Total Pages 48]	a. Computer Readable Form (CRF)						
Descriptive title of the invention Cross Reference to Related Applications	b. Specification Sequence Listing on:						
Statement Regarding Fed sponsored R & D Reference to sequence listing, a table,	i. CD-ROM or CD-R (2 copies); or						
or a computer program listing appendix - Background of the Invention	ii paper c Statements verifying identity of above copies						
Brief Summary of the Invention Brief Description of the Drawings (if filed)	ACCOMPANYING APPLICATION PARTS						
- Detailed Description - Claim(s)	Assignment Papers (cover sheet & document(s))						
- Abstract of the Disclosure	10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney						
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 16]	11. English Translation Document (if applicable) 12 X Information Disclosure X Copies of IDS						
5. Oath or Declaration [Total Pages 4]	Statement (IDS)/PTO-1449 Citations						
a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d))	13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503)						
b. (for continuation/divisional with Box 18 compléted)	(Should be specifically iternized)						
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR	15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122						
1.63(d)(2) and 1.33(b).	16. (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.						
6 Application Data Sheet. See 37 CFR 1.76	17. Other:						
18. If a CONTINUING APPLICATION, check appropriate box, and sup or in an Application Data Sheet under 37 CFR 1.76:	ply the requisite information below and in a preliminary amendment,						
Continuation Divisional Continuation-in-part (CIP)	of prior application No.:						
Prior epplication information: Exeminer For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the	Group Art Unit:						
Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
19. CORRESPOND	ENCE ADDRESS						
X Customer Number or Ber Code Label (mach Clisticater Sci. to Anti-in to	or Correspondence address below						
Name							

28-00

Buden Nov. Statement: This form is estimated full as 0.2 Novis to complete. Time will very depending upon the needs of the individual case, Any comments on the amount of time you are required to completely like form should be seen to include following to Chief Individual Officer. U.S. Peant and Trademark Office. Weshington, DC 2023. DO NOT SEND FES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 2023.

State

Telephone

Zip Code

Fax

Date

Dec. 26, 2000

Registration No. (Attorney/Agent) 36,828

FEE TRANSMITTAL for FY 2001

Patent fees ere subject to annual revision

Complete if Known				
Application Number	To be assigned			
Filing Date	December 26, 2000			
First Named Inventor	Gene R. Anderson			
Examiner Name				
Group Art Unit				
Attemour Deaket No.	1613370 0011			

TOTAL AMOUNT OF PAYMENT (\$) 1,950.00		Attor	ney l	Docket	No.	1613370-0011		
METHOD OF PAYMENT	FEE CALCULATION (continued)							
1, X The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES							
Denosit Communication of the C	Large Small							
Account 23-1703	Fee	Entity Entity Fee Fee Fee Fee Fee Description						
Deposit C	Cod	e (\$)	Cod	e (\$)			Fee Paid	
Account Name White & Case LLP	105	130	205	65	Surcha	rge - late filing fee or oath		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127	50	227	25	Surcha cover s	rge - late provisional fili <i>n</i> g fee or heet		
Applicant claims small entity status	139	130	139	130	Non-Er	glish specification		
See 37 CFR 1.27	147	2.520	147	2,520	For filir	ng a request for <i>ex parte</i> reexamination		
2. Payment Enclosed: Check Credit card Money Other	112	920*	112	920*	Reque	sting publication of SIR prior to ser action		
Order D order	113	1,840	113	1,840	Reque	sting publication of SIR after		
FEE CALCULATION			245			ner action		
1. BASIC FILING FEE	115	110 390	215 216	55 195		ion for reply within first month ion for reply within second month		
Large Entity Small Entity Fee Fee Fee Fee Description	117	890	210	195		ion for reply within third month		
Code (\$) Code (\$) Fee Paid		1.390		695		ion for reply within fourth month		
101 710 201 355 Utility filing fee 710		1,890	228			* *		
106 320 206 160 Design filing fee	119	310	219			on for reply within fifth month of Appeal	-	
107 490 207 245 Plant filing fee	120	310		155		brief in support of an appeal		
108 710 208 355 Reissue filing fee	121	270	221			st for oral hearing ·		
114 150 214 75 Provisional filing fee		1,510		1.510		to institute a public use proceeding		
SUBTOTAL (1) (\$) 710.00	140	110	240	55		to revive - unavoidable		
2. EXTRA CLAIM FEES	141	1.240	241	620	Petition	to revive - unintentional		
Fee from Extra Claims below Fee Paid	142	1.240	242	620	Utility is	ssue fee (or reissue)		
Total Claims 80 -20** = 60 x 18 = 1080	143	440	243	220	Design	issue fee		
Independent 5 - 3** = 2 × 80 = 160	144	600	244	300	Plant is	sue fee		
Multiple Dependent =	122	130	122	130	Petition	s to the Commissioner		
	123	50	123	50	Proces	sing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Description	126	180	126	180	Submis	sion of Information Disclosure Stmt		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581	40	581	40		ing each patent assignment per y (times number of properties)		
102 80 202 40 Independent claims in excess of 3	146	710	246	355	Filing a	submission after final rejection R § 1,129(a))		
104 270 204 135 Multiple dependent claim, if not paid	149	710	249	355		ch additional invention to be		
109 80 209 40 ** Reissue independent claims over original patent	173	. 10	243	300		ned (37 CFR § 1.129(b))		
110 18 210 9 ** Reissue claims in excess of 20	179	710	279	355	Reques	t for Continued Examination (RCE)		
and over original patent	169	900	169	900	Reques	st for expedited examination sign application	1	
SUBTOTAL (2) (\$) 1240.00	Othe	r fee (s	pecify					
**or number previously paid, if greete@For Reissues, see above	*Red	uced b	y Basi	c Filing	Fee Pa	d SUBTOTAL (3) (\$)		

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SUBMITTED BY			T	Т	T	Γ	Complete (if applicable)				
Neme (Print/Type)	1	Warren	¥.	H	ı	7	Registration No. 36,828	Telephone	(650) 213-0321		
Signature	٦	NW.	L	X	L	7		Date	Dec. 26, 2000		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the emount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Falent and Trademark Office, Wasshington, DC 2023.1. DND SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patients, Wasshington, DC 2023.1.